

Form No. 1.

(1) PLACE OF BIRTH

County of Lee

Township of Lynchburg

or  
Inc. Town of

or  
City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

# CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

4448

Registration District No. 3002 Registered No. 19  
(For use of Local Registrar)

(2) Full Name of Child. Hermetta

(3) BOY OR GIRL? girl

(4) Twin or Triplet?

(5) Number in order of birth  
To be answered only in event of Twins or Triplets

(6) Are Parents Married? ye

(7) DATE OF BIRTH Feb. 17 1915  
(Name of Month) (Day) (Year)

MOTHER.

(8) FULL NAME

(9) PRESENT POSTOFFICE OF FATHER

(10) COLOR OR RACE

(12) BIRTHPLACE

(13) OCCUPATION

(20) Number of children born to mother, including present birth

FATHER.

James Hudson

Elliott

negro

Lynchburg

Farming

(11) AGE AT LAST BIRTHDAY 45  
(Years)

(14) NAME BEFORE MARRIAGE

(15) PRESENT POSTOFFICE OF MOTHER

(16) COLOR OR RACE

(18) BIRTHPLACE

(19) OCCUPATION

(21) Number of children of this mother now living, including present birth

Fannie Wilson

Elliott

negro

Vander Sle

Farming

(17) AGE AT LAST BIRTHDAY 40  
(Years)

11

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 12:00 P.M.  
(Born alive or stillborn) (Hour A. M. or P. M.)  
on the date above stated.

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Midwife

Lynchburg

(26) Witness

(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed

Feb 27 1915

(28)

E. E. Timmon  
Local Registrar

Given name added from a supplemental report

McCaw, of Columbia.

MARGIN RESERVED FOR BINDING.  
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.

\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.